

FAX TRANSMISSION

RECEIVED
CENTRAL FAX CENTER

MAY 10 2005

To: Post IssueFax #: (703) 872-9306

Phone #: () -

From: Dale Fiene

Fax #: 847-658-4323

Phone #: 847-658-5617

Sheets Transmitted: 13 including this sheetDate: 5/10/05Subject: CHANGE OF CORRESPONDENCE ADDRESS FOR PATENT #s

5,401,160

5,479,074

5,471,118

5,446,347

5,432,409

5,416,386

5,404,083

5,402,043

5,371,441

5,214,356

5,189,342

5,180,952

COMPLETED

PTO/SB/123 (09-04)

Approved for use through 11/30/2005. OMB 0851-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS
Patent**Address to:
Mail Stop Post Issue
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Patent Number	5,189,342
Issue Date	2/23/1993
Application Number	840,528
Filing Date	2/25/1992
First Named Inventor	Ole K. Nilssen
Attorney Docket Number	

Please change the Correspondence Address for the above-identified patent to:

☐ The address associated with Customer Number.

OR

☒ Firm or
Individual Name Ole K. Nilssen

Address 200 N. Harrison St., Suite 103

City Algonquin State IL ZIP 60102

Country United States of America

Telephone 847-658-5615 Fax 847-658-4323

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

This form will not affect any "fee address" provided for the above-identified patent. To change a "fee address" use the "Fee Address Indication Form" (PTO/SB/47).

I am the:

☒ Patentee.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).☐ Attorney or agent of record. Registration Number _____

Signature

Typed or

Printed Name Ole K. Nilssen

Date

Telephone 847-658-5615

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Post Issue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.